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OPIOID SUBSTITUTION TREATMENT: FROM LAW TO CLINICAL PRACTICE AND VICE VERSA

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Background. On the edge of the «Third Francophone Conference on the Treatment of Opioid Addiction», the Neuchatel Institute of Health Law compared regulations for opioid substitution treatment (OST) in Switzerland, France, Canada, Belgium and Tunisia. Most standards described appear to be linked to a historic repressive framework. Reference to the right to health as defined by the Committee on Economic, Social and Cultural Rights (general comment 14), appear to be absent or unclear. We present the rationale for creating an interdisciplinary panel from the concerned countries, in order to

prepare recommendations about how a regulative system of OST should be based on scientific evidence and right to health.

Method. Following a literature review identifying barriers to best practice from an addiction medicine point of view, a DELFI technique will identify the domains requiring removal or implementation of regulations, as a priority.

Results and Conclusion. Based on the report of comparative law cited above, following areas need to be considered: access to care and free choice to treatment; the articulation of different laws; conditions for authorisation; concerned substances and products; personal conditions posed to patients and professionals; requirements and limitations surrounding substitution treatment itself; the terms of ending or interruption; the protection of personal data.